								Application or Docket Number					
• •	PATENT APPLICATION FEE DETERMINATION RECO												
Effective Octob r 1, 2003									m 10/8 28,601				
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			28					RATE	FEE]	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 385.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			28 minus 20=		· 8			XS 9=		ОЯ	XS18=	144	
INDEPENDENT CLAIMS			9 minus 3 =		•			X43=		ОЯ	X86=	86	
MU	ATIPLE DEPE	NDENT CLAIM P	RESENT				•145=			OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2						1	TOTAL		OR	TOTAL	1000		
CLAIMS AS AMENDED - PART II								3 1			OTHER	<u> </u>	
		(Column 1)	(Column 2)			(Column 3)	L .	SMALI	LENTITY	OR	SMALL	/	
AMENDMENT A		CLAIMS REMAINING	·	HIGH		PRESENT		D.***	ADDI- TIONAL]	RATE	ADDI- TIONAL	
		AFTER AMENDMENT		PREVIO		EXTRA		RATE	FEE		DAIE	FEE	
	Total	. 28,	Minus	-2	8			X\$ 9=		OR	X\$18=		
	Independent	. 4	Minus	•••	4	:		X43•		ОЯ	X86=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						,	+145=		OR	+290=		
	(11.21.05)					-W	Λ	TOTA			TOTAL	· ·	
	(Column 1) (Column 2) (Column 3)						*	ADDIT. FE	E	J~	ADDIT. FEE		
	/ / /	CLAIMS		HIGH	ST		1		ADDI-	1		ADDI-	
AMENDMENT B	6/15/10	REMAINING AFTER		PREVIO	USLY	PRESENT EXTRA		RATE	TIONAL		RATE	TIONAL FEE	
	Total	AMENDMENT . 1	Minus	PAIO	OR		H	X\$ 9=	FEE		X\$18=	FEE	
	Independent	. 4	Minus	- /	cl		H		1:	OR			
	•	NTATION OF MU		ENDENT	CLAIM	<u>' </u>	1 L	X43=	 	OR	X86=		
								+145=		OR	+290=		
							. 4	DDIT, FEE		OR	TOTAL		
•				· — 									
U	`	(Column 1) CLAMS		(Colum HIGHE NUMB	ST	(Column 3)	Г		ADDI-			ADDI-	
MEN		REMAINING AFTER		PREVIO	USLY	EXTRA		RATE	TIONAL		RATE	TIONAL	
	Total	AMENDMENT	Minus	PAID F		5	 -	XS 9=	FEE		X\$18=	FEE	
	Independent		Minus			=	l ŀ			OR			
Ž.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						L	X43=		OR	X86=		
	, aldi Luede	' [+145=		OR	+290=							
* If the entry in column 1 is less than the entry in column 2, write 'V' in column 3.													
-	the "Highest Nur	mber Previously Paid ber Previously Paid	d For IN THE	S SPACE &	less that	I T eath I.		DDIT. FEE Id in the ap			ODIT, FEEL IMO 1.		